

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AW</i>		8/3/00
O.I.P.E. CLASSIFIER		19	8900
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>AB</i>	5622	9-20-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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Form PTO-431 (Rev. 6/99)

If more than 150 claims or 10 actions
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